251299

(Caption of Case) Example: Application for a Class C Charter Certificate from John Doe dba Doe's Limo			) BEFORE THE ) PUBLIC SERVICE COMMISSION ) OF SOUTH CAROLINA ) ) ) TRANSPORTATION COVER SHEET		
<del>-</del>	ague	DE 40 HILL	)		
Request to Amend Limil aguesas F			) DOCKET ) NUMBER: <u>2014</u> - 24 - T		
(Ple	ase type or print		) If this is your fi ) have a Docket l	rst time filing an application with the PSC, you will not Number. The Commission will assign one to you. If you the Commission before, a Docket Number was assigned	
Submitted by: Address:		Shari Petraus	Telephone:	Telephone: (843) 455-9073	
		213 mc Kandra	Fax:		
		MB, SC 29579	Other: Email:		
	illed out comple	NATURE OF ACTIO	ON (Check all th	at apply)	
	Application -	– Class C Taxi		Request to Amend Scope of Authority	
	Application -	- Class C Charter		Request to Amend Tariff (rate increase, etc.)	
	Application -	- Class C Charter Bus	Q	Request to Amend Passenger Limit	
	Application -	- Class C Non-Emergency		Request	
	Application -	- Class E Household Goods		Exhibit	
	Application -	- Class E Hazardous Waste		Late-Filed Exhibit	
	Application			Letter	
	Request for I	Extension to Comply with Order		Proposed Order	
	Request for C Public Conve	Order Granting Authority to Obtain Certificate enience and Necessity to Be Rescinded	of	Publisher's Affidavit	
	Request for C	Cancellation of Certificate		Reservation Letter SECSOSTICE	
	Request for S	Suspension		Response	
	Request for R	Reinstatement		Return to Petition	
П	Request for N	Name Change on Certificate		Othon	

**CLASS C AMENDMENT FORM** 

File the original with:	Mail or fax a copy to:				
Public Service Commission of South Carolina Clerk's Office Motor Carrier Matters P.O. Box 11649 Columbia, S.C. 29211 (803) 896 – 5100 FAX (803) 896-5199	S.C. Office of Regulatory Staff Transportation Department 1401 Main Street, Suite 900 Columbia, S.C. 29201 (803) 737-0578 FAX (803) 737-0815				
DATE: WaT/14					
I have the following Certificate:					
Class C Taxi#Class C Charter#	2014-219-T Class C Charter Bus #				
Class C Non-Emergency # ORS 8907					
Please consider this as my request for the following amendment(s) to my Certificate:					
Name Change					
From: DBA:					
(Current Name)	(Current DBA if applicable)				
TO: DBA	A:				
(New Name)	(New DBA if applicable)				
Scope of Authority					
	D:				
(Current Scope)	(New Scope)				
Passenger Limit					
From:To	o:15				
(Current Limit Number)	(New Limit Number)				
Shari Petrauskas					
dba: Precious Cargo Shuttle	213 mc Kendree Lane				
Name & DBA if DBA is applicable) & Limo	(Street and/or Mailing Address)				
(City, State, Zip Code)	Signature)				
(843) 455-9073	_ Olone )				
(Telephone Number)	(Title) Owner, President, etc.				